Supporting Declaration of Departmental Salaried Employee Costs

For each 2005 aggravated murder case claimed, a separate copy of this declaration must be completed by <u>each department</u> that paid salaried employees. Include all salary costs of departmental employees for time spent on the aggravated murder case during 2005, and place the completed form(s) at Tab 1.

1.	The undersigned is the sup	ervisor or	Title	of the Name of department
2.	This declaration is submitted for Combined Declaration of	,	ned in support of _	County's claim
	Name of case			
3.	. The total cost of salary and benefits for time spent on this aggravated murder case during 2005 was \$			
4.	The undersigned has personal knowledge of the employee salary costs incurred in this case, has reviewed the departmental records and has determined that this claim is accurate.			
	declare under penalty hat the foregoing is true		der the laws c	of the State of Washington
	Signature		Date	
	Printed Name	Title	Place	